

2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2004

FILED
Mar 25, 2004 08:00 AM
Secretary of State

DOCUMENT # A05332 1. Entity Name SB PARTNERS, LTD.		
--	--	---

Principal Place of Business 1251 AVENUE OF THE AMERICAS 36TH FL NEW YORK NY 10020	Mailing Address 1251 AVENUE OF THE AMERICAS 36TH FL NEW YORK NY 10020
---	---

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc	Suite, Apt. #, etc

City & State	City & State
Zip	Country



MOORE CR2E003 (11/03)

4. FEI Number	13-6294787	Applied For
		Not Applicable

5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
----------------------------------	--------------------------	--------------------------------

6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 526 E. PARK AVENUE TALLAHASSEE FL 32301	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City
---	---

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE	DATE
-----------	------

9. Capital Contributions as Shown on record.	\$28,747,882.00	10. Amount of Capital Contributions in FLORIDA to date.	28,747,882	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
--	-----------------	---	------------	---

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P02962	STREET ADDRESS	
NAME	SB PARTNERS REAL ESTATE CORPORATION	CITY-ST-ZIP	
STREET ADDRESS	1251 AVENUE OF THE AMERICAS		
CITY-ST-ZIP	NEW YORK NY 10020		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

000000103728
 04/05/04-80068-005 526.25

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

By: SB Partners Real Estate Corporation, as general partner

SIGNATURE: <i>Ellen Huttenberg, Asst. Secy</i>	2/12/04	212-408-5000
--	---------	--------------